CONFIDENTIAL

CHARLOTTE TEACCH CLASSROOM TRAINING

STUDENT SKILL FORM: PRE-INFORMATION FOR TRAINING

Filename: ACADSTUSKILL Revision Date: July 2013

STUDENT:	Di	by Allai		DOB:	AGE: _	5 years 9 months
EDUCATION	PLAC	EMENT/SERVICES:	<u>Diby is a</u>	<u>kindergarten</u>	student in a l	K-5 elementary school.
He has only be	<u>een in</u>	the US since April o	f last year. H	<u>le entered sc</u>	hool this fall a	<u>as an English as a</u>
Second Langu	uage s	tudent. The difficulti	es he has wit	th English im	oacts his abili	ty to communicate and
learn and has	lead t	o disruptive behavior	rs. He receive	es ESL supp	ort daily. He	was diagnosed with AS
this winter and	d is be	ing referred for an ev	valuation for e	exceptional s	udent suppor	rt services. His last
speech evalua	ation w	as inconclusive and	the speech th	herapist felt h	is difficulties	were all related to the
language barr	ier. H	is parents shared tha	at he has diffi	culty in his na	ative languag	e and most of his verba
responses are	eithe	r echolalia or simple	3-4 word phra	ases.		
INTEREST	1.	MUSIC AND DAN	CING			
AND HOBBIE						
_	2.	cars				
	3.	coloring				
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DESCRIBE IN DETAIL STUDENT'S ABILITIES IN THE SKILL AREAS LISTED IN THE BOXES BELOW; PLEASE BE SPECIFIC IN TERMS OF WHAT STUDENT CAN DO AND CANNOT DO:

SKILL AREA: Math (e.g., 1:1 correspondence, quantity, numeral identification, etc.)

DESCRIPTION OF SKILLS:

counts 1-100 and can do simple addition and simple word problems. (I see 2 cats and I can identify numbers but sometimes has difficulty rote counting. Dibby has learned his simple addition facts and he can do all single digit attrition problems. He loves doing this. He does not seem to understand what he is doing and if given objects he cannot write the math problem.

SKILL AREA: Reading (e.g., letter & sound, name identification, sight words, etc.)

DESCRIPTION OF SKILLS:

Diby can identify the majority of letters in the alphabet. He is able to identify sound that some of the letters make inconsistently. Can match and identify ten colors and basic shapes. He can match objects. He reads and spells some sight words. Reads simple books on a pre-primmer level but does not comprehend. He learns new sight words with ease and if taught once, he can match words to pictures.

SKILL AREA:	Writing (e.g.,	tracing,	dot-to-dot,	line &	shape drawing	, spelling,	handwriting,
composition, e	etc.)						

DESCRIPTION OF SKILLS:

Diby can trace or copy his letters and numbers, writes his name and also sight words. When he is tracing he is very careful and seems to enjoy the activity. His skills are different when he is asked to write without tracing. He does not stay on the line, his writing is random and he does not like write. If he knows the spelling he can write words for simple pictures.

SKILL AREA: Science/Social Studies (e.g., labeling, categories, opposites, function, etc.)

DESCRIPTION OF SKILLS:

Learning the 5 senses, parts of landscape. Has been introduced to community helpers, but he does not really grasp these concepts.

SKILL AREA: Vocational Behaviors / Work Experience (e.g., attending to work, accepting feedback, managing break time, length of work sessions, etc.)

DESCRIPTION OF SKILLS:

Diby will come to work and finish his assignment if he knows the skill. Usually in class someone has to stay near him because he does not seem to understand new work. He likes to help by collecting crayons. He can put them in the box.

SKILL AREA: Home EC / Home management domestic

DESCRIPTION OF SKILLS:

He puts his backpack in the correct spot but needs a reminder where his agenda goes. He understands cleaning up his toys after break

SKILL AREA: Hygiene / Appearance (e.g., grooming, dressing, toileting, table manners etc.)
DESCRIPTION OF SKILLS: Diby sometimes has difficulty turning on the faucet to wash his hands. He will not always wash his hands unless reminded to. He needs help with shoes and zippers. Diby can feed himself but has difficulty opening some containers. He eats slowly and neatly. He uses a toothpick instead of a spoon or fork. He does not like finger foods
SKILL AREA: TRANSITIONS (e.g., changing activities, tolerating changes in assignments, etc.)
DESCRIPTION OF SKILLS: He will transition with the class this has improves since he started medication. Anything new throws him off and can start behavior problems
SKILL AREA: SOCIAL/EMOTIONAL (e.g., peer interactions, manners, greetings, affect, etc.)
DESCRIPTION OF SKILLS: He mostly plays alone but sometimes he will play beside another child. He does not like to be touched and if another child touches him he will take his toys and move away. He will try to obtain peers attention and is starting to use classmates names to get their attention and occasionally he will try to socialize with them. Diby will look at the person greeting him but he does not always respond when someone greets him. He usually plays alone on the playground and he is stand-offish in groups his medication has helped with hi social skills because he seems more interested in others now.
SKILL AREA: RECREATION/LEISURE (e.g., break times, free time, etc.)
DESCRIPTION OF SKILLS: enjoys break time. Asks to play

SKILL AREA: COMMUNICATION (spontaneous expressive communication, receptive skills, etc.)

How do you communicate with student?

I use a combination of picture cues and verbal directions to communicate with Diby. When he is having a behavior problem he does respond to words so we use picture cards for behavior.

How does student communicate with you when not prompted?

Only if required. He uses some simple sentences. He does not speak clearly and it is hard to understand him.

What will student communicate for?

To say he has finished work or to ask to play. He is not interested in asking any questions or for things he wants or needs

What augmentative devices are used (if any)? none

DESCRIPTION OF COMMUNICATION SKILLS:

English is Diby's second language. He is using some English but with new people he speaks in his native language using what sounds like 2-3 word phrases. When he is comfortable he uses 2-3 word phrases in English to ask for help. He will make comments about what he is doing, but he seldom uses more than 3 words unless he is repeating something he heard.

SKILL AREA: COMMUNITY (How does student manage him/herself in community?)

DESCRIPTION OF SKILLS: We do not go out in the community

SKILL AREA: INDEPENDENCE (How much does student do on his/her own?)

How long will student work without cues? Very briefly

What tasks hold his/her attention?

math

DESCRIPTION OF SKILLS:

SKILL AREA: LEARNING STYLE

Describe attention span:

Diby cannot listen or stay focused on tasks. He is doing much better after starting medication, but his attention span is short.

Describe organizational skills: He will jump up from the table and wonder around the room unless he has one to one attention.

Describe task endurance: He only works for short times he does better with math activities. He is easily distracted.

Describe level of self-control while working: This has improved with medication, before he could not sit or focus. At times he is restless and impulsive.

Describe reaction to teacher demand/intrusion: He is working much better with the teacher now.

Describe motivation to complete work: He is not interested in praise.

SKILL AREA: BEHAVIORAL
Describe all difficult behaviors: Initially he was very difficult. His behaviors included hitting other students, saying violent things like "I'm going to tie you up and set you on fire." As his English improved he starting telling the teacher when other students were bothering him and stopped making violent threats. Sometimes leaves his desk or tries to leave the room. He will lie on desk if work is too long.
How frequently do these behaviors occur? Rarely now that he speaks better English.
What triggers difficult behaviors? Other students touching him, situations he does not understand
How are behaviors typically managed?
How does s/he react to overstimulation (e.g., too many people, too much noise)?
Is s/he easily calmed once upset?
Other comments re behavior:
PERTINENT MEDICAL INFORMATION
Medications: Concerta
Allergies:
Other Medical conditions:
Other Pertinent Information:

AUTISM MANAGEMENT

Degree of autism: I see some traits of autism but he has improved so much with medication that we are not sure he has autism

Cognitive level or IQ: average IQ on nonverbal test

Unusual body or sensory responses/interests: does not like for other students to touch him

Any particular objects/topics of dislike?

Additional comments/questions: